

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000076134

Entity Name: VICKERS ART & FRAME, INC.

FILED
May 19, 2005
Secretary of State

Current Principal Place of Business:

601 N CONGRESS AVENUE
SUITE 104
DELRAY BEACH, FL 33445 US

New Principal Place of Business:

Current Mailing Address:

601 N CONGRESS AVENUE
SUITE 104
DELRAY BEACH, FL 33445 US

New Mailing Address:

FEI Number: 02-0701522

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VICKERS, MARK R
4269 FRANCES DRIVE
DELRAY BEACH, FL 33445 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPVP () Delete
Name: VICKERS, MARK R
Address: 4269 FRANCES DRIVE
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: DST () Delete
Name: JONES, PAULA
Address: 4269 FRANCES DRIVE
City-St-Zip: DELRAY BEACH, FL 33445 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: VICKERS, MARK R
Address: 4269 FRANCES DRIVE
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: DVST (X) Change () Addition
Name: JONES, PAULA
Address: 4269 FRANCES DRIVE
City-St-Zip: DELRAY BEACH, FL 33445 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAULA JONES

VP

05/19/2005

Electronic Signature of Signing Officer or Director

Date